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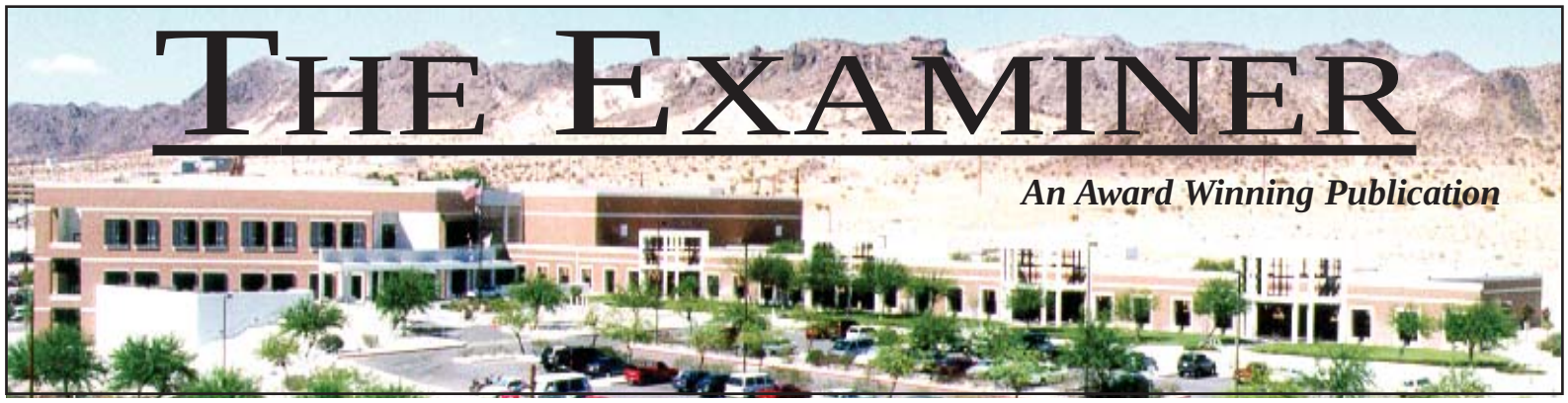
Robert E. Bush
Naval Hospital

The Examiner

An Award Winning Publication



http://www.med.navy.mil/sites/nhtp/pages/default.aspx

Bringing the Best in Medical Care to Patients

Desert Regional Medical Center

During a recent visit to the Desert Regional Medical Center in Palm Springs is far left, Lt. Cmdr. Raul Carillo, Department Head of Emergency Medicine; fourth from left, Capt. Ann Bobeck, Commanding Officer of the Naval Hospital; next is Cmdr. Maria Young, Director of Nursing Services and Health Care Operations of the Naval Hospital and HMCS Rodney Ruth, the command's Senior Enlisted Advisor. In an ongoing endeavor, the executive staff of the various TriWest network medical centers and the Naval Hospital Board of Directors meet to discuss opportunities to bring the best possible medical care to the Marines, Sailors, Retirees and family members eligible for care at the Robert E. Bush Naval Hospital.

Eisenhower Medical Center

Captain Ann Bobeck meets with G. Aubrey Serfling, center, President and Chief Executive Officer of Eisenhower Medical Center and Michael Landis, right, President of the Eisenhower Foundation. Eisenhower Medical Center is named for General Dwight D. Eisenhower who led the Allied Forces in World War II to victory and then became the 34th President of the United States to serve from 1953 to 1961. With this heritage to live up to, the staff of the Eisenhower Medical Center is dedicated to being an important partner of this hospital in bringing health care to the eligible beneficiaries of the Robert E. Bush Naval Hospital, named for our own World War II hero.

Patients seen in March -- 14,379
Appointment No Shows in March -- 1,094

One in ten patients do not show up for their appointments at this hospital. If an appointment is no longer needed, please call so another patient can be seen.

To make an appointment call -- 760-830-2752
To cancel an appointment call -- 760-830-2369

Did you know?...

You have the right to express your concerns about patient safety and quality of care.

There are several avenues open to you:

* Through the ICE website.
* Through the Naval Hospital Customer Comment Cards.
* The Hospital's Customer Relations Officer at 760-830-2475, or any of the Customer Relations representatives in the hospital's clinics.

Or Directly to the Joint Commission via:

E-mail at
complaint@jointcomission.org

Fax:
Office of Quality Monitoring
630-792-5636

Mail:
Office of Quality Monitoring
The Joint Commission
Oak Renaissance Boulevard
Oakbrook Terrace, IL 60181

Introducing the Hospital's New Customer Relations Officer

The Naval Hospital is happy to introduce you to one of its newest staff members, Mr. Robert Greger.

Robert has been hired on to fill the full-time position as the Customer Relations Officer, otherwise known as the CRO.

Robert's office is located just inside the hospital's front entrance across from the Quarterdeck. He can be reached at 760-830-2475 during normal working hours.

As a Special Assistant to the Commanding Officer, Robert is here to ensure your concerns or questions are heard and answered.

Commanding Officer
Naval Hospital Public Affairs Office
Box 788250 MAGTFTC
Twentynine Palms, CA 92278-8250

The Sun is now Drenching us with its Rays so it's time to be Aware of Skin Care

By Martha Hunt, MA, CAMF
Health Promotions Coordinator
Robert E. Bush Naval Hospital

Your skin is the largest organ of your body and it is constantly renewing itself throughout your life.

Skin protects us from heat, light, injury, and infection and stores water and fat. It keeps itself moist and intact to the best of its ability but sun, heat, dryness and chemical exposure works against your skin to damage it and dry it out.

We need some exposure to sunlight for Vitamin D production, however, over exposure to the sun leads to skin cancer, premature aging of the skin and wrinkling. Also, over age 50 our skin doesn't make as much vitamin D as it used to, putting us at risk for vitamin D deficiency.

Skin cancer is the most common form of cancer with over one million Americans every year being diagnosed with skin cancer and almost 10,000 dying from it. Half of all Americans who live to age 65 will be diagnosed with some form of skin cancer. UV A and B radiation from the sun is the leading cause of skin cancer, however UV C radiation from sun lamps and tanning booths also cause skin cancer.

Cases of skin cancers are more likely to occur where there is brighter and stronger sunlight such as nearer the equator or at high altitude. In other words, here in the high desert.

Ninety percent of all skin cancers develop on the face, neck and arms where sun exposure is the greatest. Those individuals at highest risk for skin cancer are those who have light skin, hair and eyes, a family history of skin cancer, chronic exposure to the sun, a history of bad sunburns early in life, or have lots of moles or freckles. However, everyone is at risk of skin cancer, no matter how dark ones' skin or hair.

Skin cancer growths occur when normally dividing skin cells begin to grow abnormally. UV rays damage the DNA of skin cells and causes them to reproduce abnormally. Once a cells' DNA is damaged, the damage is permanent and is replicated over and over until an abnormal patch of cells is seen on the surface of the skin. There are over 100 different types of skin cancer, depending on what layer of the skin they are found and what types of skin cells are affected.

In fact, the damage to your skin only needs to be 1 mm deep or the size of this '-' to cause damaged cells which then find their way into your blood stream. Once these skin cancer cells find their way to your blood stream you can develop skin cancers in any organ of your body.

What to look for -

* Patches of skin that tend to bleed or ooze,
* open sores that don't heal,
* patches that have an irregular shape or edges to them,
* patches that have varied colors in their pigmentation,
* growths larger than the width of a pencil eraser,
* patches that have a scaly, crusty or bumpy appearance to the surface of them, or
* growths that itch or are tender and painful.

Sun screen works by blocking out some, but not all, of the UV A and B rays. Sun screen does not protect against UV C radiation. The higher the SPF value, the greater the protection from burning. Use a sun screen that blocks both UV A and UV B radiation as they both cause skin cancer and burning. UV A rays cause damage deep into the skin while UV B rays damage the surface layers. Exposure to UV A and UV B radiation has also been associated with non-Hodgkin's Lymphoma and with eye cancers, specifically on the cornea and the conjunctiva (the white part).

If you will be in the sun more than 15 minutes, wear sun screen with an SPF value of 20 or greater. Older adults should always use a sun screen with an SPF of 30 or higher. Apply sun screen at least 30 minutes before going out into the sun and re-apply every 2 to 3 hours.

Since sun screen alone is not 100 percent effective against the damage produced by UV rays, take other protective measures as well. When outdoors in the sun, wear hats, sunglasses, light colored, loose fitting clothing, full length pants and socks to reflect the heat and allow your skin to breathe. Check all areas of your skin surfaces regularly for any changes. If you can't see a certain area of your skin, use mirrors or get a friend to check for you. Call your doctor if you have patches of skin or growths on your skin that bleed or change shape or color. If you have a family history of skin cancer, alert your doctor and watch your skin carefully for changes.

Drink plenty of water and other replenishing liquids (not alcohol or caffeine) to help your skin sweat and cool itself. Avoid the sun between 10 a.m. and 3 p.m. whenever possible as the suns rays are the most damaging. You can burn even on a cloudy day as 80 percent of the sun's rays still penetrate through clouds.

Teach your kids early about the dangers of the sun as most skin damage occurs before the age of 20. Never use sun screen on infants less than 6 months of age as the chemicals in sun block are absorbed directly into their body and may irritate their skin. Rather keep them out of direct sun and always make sure they are covered with hats and baby sunglasses.

Damage from the sun is cumulative over your life span and builds up over time. The DNA damage you received from that sun burn when you were a teen is still with you and will never go away. The best protection from skin cancer is to avoid direct exposure of your skin to the sun. When that is not possible, use sun screen to help reduce the absorption of UV rays and the DNA damage that results. You only have one skin, wear it well.

May is National Women's Health Month

Naval Hospital Twentynine Palms is proud to support Women's Health by having two Women's Health Fairs for the month of May.

They include walk- in well women's exams and health care professionals who are available to answer your questions.

There will be a booth for nutrition, breast care, mental health and much more.

We will have a raffle for those women who come to the fair with prizes and a free snack table.

If you are due for your exam and would like to guarantee a spot please call (760)830-2501, Jessica McLaren RN Breast Care Coordinator.

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What is Metabolic Syndrome? - Knowing the Answer May Help you Stay Healthy

By Martha Hunt, MA, CAMF
Health Promotion and Wellness
Robert E. Bush Naval Hospital

Metabolic syndrome is defined as: a group of risk factors linked to being overweight or obese that increase your chance for heart disease and other health problems such as diabetes and stroke.

The five conditions listed below are metabolic risk factors for heart disease.

A person can develop any one of these risk factors by itself, but they tend to occur together. Metabolic syndrome is diagnosed when a person has at least three of these heart disease risk factors:

* A large waistline. This is also called abdominal obesity or 'having an apple shape.'

* A higher than normal triglyceride level in the blood (or you're on medicine to treat high triglycerides -- or bad cholesterol). Triglycerides are a type of fat found in the blood.

* A lower than normal level of HDL cholesterol (high-density lipoprotein cholesterol or good cholesterol) in the blood (or you're on medicine to treat low HDL).

* Higher than normal blood pressure (or you're on medicine to treat high blood pressure).

* Higher than normal fasting blood sugar (glucose) (or you're on medicine to treat high blood sugar). Mildly high blood sugar can be an early warning sign of diabetes.

Other factors that can contribute to metabolic syndrome are tobacco use, diets high in meat, fried food and diet sodas (or any artificial sweeteners). Diet sodas make you crave calories from other sources and can cause over eating rather than help you cut calories. Also, people who suffer from high levels of stress are twice as likely to develop metabolic syndrome for many reasons including the fact that stress causes changes to your blood sugar levels.

Tobacco use also increases your risk of metabolic syndrome. Tobacco use...

* Makes you crave starch and fat - a large waistline.

* Raises your triglyceride levels - a higher than normal triglyceride level in the blood.

* Lowers your HDL level - a lower than normal level of HDL cholesterol.

* Gives you high blood pressure - higher than normal blood pressure (or you're on medicine to treat high blood pressure).

* Doubles your risk of diabetes and blocks the release of insulin - higher than normal fasting blood sugar (glucose) (or you're on medicine to treat high blood sugar). Also, if you have a family member that has diabetes, your risk for diabetes is even higher.

For nutrition information, contact your primary care provider for a referral to the registered dietitian. Call Health Promotion and Wellness at (760) 830-2814 or talk to your health care provider for more information on tobacco cessation.

Allergy Tests Covered for TRICARE Beneficiaries

By Peter Holstein
TRICARE Management Activity

Every year millions of Americans suffer from allergies, with symptoms ranging from irritating to life-threatening.

TRICARE beneficiaries are eligible to receive care for the testing and treatment of conditions relating to allergies.

According to the National Institute of Allergy and Infectious Diseases (NIAID), allergy symptoms are the result of inappropriate responses by the body's immune system to normally harmless substances. Allergic reactions can be caused by airborne particles like dust or pollen, foods such as peanuts or an insect sting or bite.

Knowing what substance causes a reaction can improve quality of life for allergy sufferers and avoid unpleasant surprises down the road. An allergy to a common food ingredient like wheat can cause a variety of seemingly unrelated symptoms such as itchy rashes, nasal congestion or nausea. A parent doesn't want to discover their child is allergic to bees only after they are stung.

Tests administered by allergists can identify most allergies. The most common allergy tests are either skin or blood tests. For some food allergies, an allergist will recommend an elimination diet to link certain foods to specific symptoms.

Once an allergy is diagnosed, beneficiaries can treat it with over-the-counter or prescription medications. Allergists sometimes recommend allergy sufferers change their behavior or diet to avoid an allergy causing substance. An allergist can also prescribe a series of shots called immunotherapy, designed to gradually desensitize the immune system to a specific allergic trigger.

TRICARE covers prescription medication approved by the FDA and allergy treatments administered by allergists. However, beneficiaries are responsible for the cost of most over-the-counter medications. To see if a medication is covered by TRICARE, use the online formulary search tool, www.pec.ha.osd.mil.

TRICARE Prime beneficiaries must get a referral from their primary care manager to see an allergy specialist. There is no out-of-pocket cost for Prime beneficiaries to get testing at a TRICARE network provider. TRICARE Standard and other beneficiaries may get testing at any TRICARE authorized provider, but annual deductibles and cost shares apply. Out-of-pocket costs are lower at TRICARE network providers. At-home allergy testing products purchased over-the-counter are not covered by TRICARE.

For more information about allergies, visit the NIAID online at www.niaid.nih.gov. Beneficiaries can get more information on the allergy services TRICARE offers and how to arrange care by visiting TRICARE's website at www.tricare.mil/mybenefit/allergy.

Phone Home: Transfer TRICARE Prime Enrollment by Phone

Brian P. Smith
TriWest Healthcare Alliance

Moving to a new region or overseas? Don't forget to make a call before you leave.

Active duty Service members (ADSM) and active duty family members (ADFM) who are moving to a new stateside or overseas TRICARE region can now easily transfer their TRICARE Prime enrollment by phone.

Start the process

Eligible TRICARE Prime beneficiaries can either call their current TRICARE contractor or go to the TRICARE Service Center at their installation medical treatment facility to start the transfer process. The contractor will ask for:

* the sponsor and family members who are transferring

* the sponsor or spouse's mobile phone and email address

* the new location

* the expected date of arrival at the new location.

Complete the transfer

The TRICARE contractor at the new location will contact the sponsor or family members to complete the enrollment transfer around the planned date of arrival.

ADSMs and ADFMs moving within the West Region can also transfer their enrollment by phone. All they need to do is call TriWest at 1-888-TRI-

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Atlas
2X3

Super Stars...

HM3 Rabeline Brown, General Surgery/Orthopedic Clinic receives a Navy and Marine Corps Achievement Medal for her accomplishments while assigned to the Robert E. Bush Naval Hospital.

Lt. Cmdr. Christina Frix, Nurse Anesthetist, receives the Navy and Marine Corps Commendation Medal for her work at the Robert E. Bush Naval Hospital.

HM2 Ashley Groke, Medical Readiness Clinic, receives the Military Outstanding Volunteer Service Medal.

Cmdr. Donna Jefcoat, Director for Administration, Naval Hospital Twentynine Palms, receives a Meritorious Service Medal for her work while assigned to the command.

Lt. Marko Radakovic, Nurse Corps Officer in the Emergency Medicine Department, receives a Navy and Marine Corps Achievement Medal for his work at the Robert E. Bush Naval Hospital.

HM3 Dominique Lemons, Physical Therapy, has completed the rigorous standards and requirements of the command to have the honor of participating in the hospital's Honor Guard and to wear the Honor Guard Aiguillette.

Lt. Nancy Perez, Nurse Corps Officer in the Multi-Service Ward, receives a Gold Star in Lieu of her third award of the Navy and Marine Corps Achievement Medal for her work at the Robert E. Bush Naval Hospital.

Lt. David Myers, a Nurse Corps Officer in the Maternal Infant Nursing Department, receives a Military Outstanding Volunteer Service Medal.

Lt. Anna Rosendahl, Medical Service Corps Officer in the directorate of Medical Services takes the oath at her recent promotion ceremony.

The April Awards Ceremony Photos were taken by AO1 Louis Hovas, who was temporarily assigned to the hospital due to a hold on his transfer to Japan because of the massive earth quake that took place there.

How to be the MVP of Your Health Team

By Tyler Patterson
TriWest Healthcare Alliance

As one saying goes: If you don't have your health, what have you got? Remember: it's your health.

You should work with your doctor, your nurse, your pharmacist...all the other members of your health team...to manage your health.

Not only is your health a precious resource, so is your time. To help make sure you are making the most of your medical appointments, here are a few tips to keep in mind when visiting your doctor:

Update your roster: Accurate contact information is vital to keep you up-to-date on appointments and test results. Wrong information in DEERS can affect your eligibility for some care. Learn how to update your DEERS contact record online at www.triwest.com/bwe.

...You are a critical part of your healthcare team. You owe it to yourself to be involved...

Be ready for pinch hitters: You may be referred to a specialist for care your primary care manager cannot provide. If that happens, remember to wait for your authorization letter to arrive before setting your specialty care appointment. Register for a secure triwest.com account and receive an electronic version of your authorization letter in hours, instead of waiting for days on the mail. Follow the directions in the letter to make sure you don't get a claims curveball later.

Play as a team: When you are seeing a new doctor or specialist, share any medications or tests from your other doctors. This goes double if you have multiple prescriptions, or are taking over-the-counter medicines.

Preparation is key: It can be easy to forget things during an examination. Preparing in advance can help eliminate those "I should have asked..." moments while you're heading home.

You are a critical part of your healthcare team. You owe it to yourself to be involved.

TriWest understands that you need the best team to help you do, and feel, your best. That's why TriWest has built a robust TRICARE provider network in the west region. The providers' focus should always be on you...the TRICARE beneficiary...and TriWest works to support your providers so they can create and carry out your game plan.

HM3 William Roots, assigned to the Main Operating Room, receives the Military Outstanding Volunteer Service Award.

Lt. Anna Rosendahl, directorate of Medical Services, receives a Gold Star in Lieu of her fifth Navy and Marine Corps Achievement Medal for her service during her recent deployment to in Kuwait.

Captain Ann Bobeck pins a collar device on the uniform of Commander William Schalck at his promotion ceremony. Schalck is a Physicians Assistant in the Orthopedics Clinic of the hospital.

Charter Signing Brings Better Care Environment...

Captain Ann Bobeck, Commanding Officer, Naval Hospital Twentynine Palms, at the table, signs Charters for the "Fish Philosophy" which encourages the staff to have fun and enjoy their jobs while giving the best possible care to patients. Also, the Skipper signed another Charter to provide guidance to the process that refers patients to speciality care at one of the hospital's network providers. Present at this signing were from left to right, Robert Greger, Customer Relations Officer; HM1 Tanya Wheeler, Laboratory; Leon Garner, Fiscal Department; Lt. Cmdr. Gloria Garner, Pharmacist; Eric Von Poppen, Referral Manager in Health Care Operations; HM1 Henry Forcadilla Leading Petty Officer in Radiology; and Mary Ellen Hogan, Organizational Process Improvement Coordinator.

New Features Allow Users Access to Expanded Personal Health Data Online

FALLS CHURCH, Va. -- A new feature on TRICARE Online at www.tricareonline.com now allows users access to expanded personal health data, including lab results, patient history and diagnoses, and provider visits.

These features are an expansion of the current Blue Button capability, which already allowed beneficiaries to safely and securely access and print or save their demographic information, allergy and medication profiles. The Blue Button features will further encourage beneficiaries to actively engage in their healthcare. The level of data available will be dependent on where treatment occurs -- with the most data available to those who regularly get care at military hospitals and clinics.

"These new capabilities are a major step forward in engaging military health system patients as partners in their own health care," said Rear Adm. Christine Hunter, TRICARE Management Activity deputy director. "Personal electronic health records can also improve care by conveying accurate patient information between providers, avoiding duplication of tests and reducing delays in treatment."

The Blue Button was fielded by TRICARE and was made generally available by other federal health care providers last year. It is the result of a close interagency partnership between the Department of Defense (DoD), Centers for Medicare and Medicaid Services (CMS) and the Department of Veterans Affairs (VA). Blue Button already has over 250,000 users.

"Innovations like the Blue Button are great examples of how healthcare information technology can keep institutions like TRICARE, CMS and VA on the vanguard of patient care by enabling safe, secure access to their electronic records," said Veterans Affairs Chief of Staff John Gingrich. "TRICARE has raised the bar on what can be accomplished when our agencies work closely together."

"The Blue Button efforts are just another example of how DoD and VA are working together to shape the future of health care IT collaboration, interoperability and transparency for the patients and families we serve," said Dr. George Peach Taylor, Jr., the acting Principal Deputy Assistant Secretary of Defense (Health Affairs). "We could not have accomplished this without the continuing strong collaboration between DoD and the VA."

TRICARE Online (TOL) is the Military Health System's Internet point of entry that provides all 9.6 million TRICARE beneficiaries access to available healthcare services and information through an enterprise-wide secure portal. TOL users who receive their care at a military treatment facility can schedule appointments, order prescription refills and view their personal health data. Other TOL users with active prescriptions at a military pharmacy can also request a refill for those prescriptions.

To learn more, go to www.tricareonline.com or visit www.health.mil/mhscio. For more news about health IT news, subscribe to The Portal, the leading news source for military health IT at www.health.mil/mhscio.

America's Military Health System is a unique partnership of medical educators, medical researchers, and healthcare providers and their support personnel worldwide. This DoD enterprise consists of the Office of the Assistant Secretary of Defense for Health Affairs; the medical departments of the Army, Navy, Marine Corps, Air Force, Coast Guard and Joint Chiefs of Staff; the Combatant Command surgeons; and TRICARE providers including private sector healthcare providers, hospitals and pharmacies.

Sign up for TRICARE e-mail updates at www.tricare.mil/subscriptions.

Connect with TRICARE on Facebook and Twitter at www.facebook.com/tricare and www.twitter.com/tricare.

The TRICARE Management Activity administers the worldwide health care plan for 9.6 million eligible beneficiaries of the uniformed services, retirees and their families.

Sub Offer
3X3

Research Examines Blast Impact on Human Brain

By Donna Miles
American Forces Press Service

FORT DETRICK, Md., April 12, 2011 - There's little debate about the risk of a brain injury when a service member gets a blow to the head -- whether from an enemy round or from crashing against a wall or being inside a vehicle during an explosion.

But some of the foremost academic researchers from around the world, working in cooperation with the Defense Department's Blast Injury Research Program, are trying to determine exactly what happens to a service member's brain when it's exposed to a blast, but with no direct head impact.

Their answers could change the way the military protects tens of thousands of deployed troops from improvised explosive devices, mortar rounds and other explosions, Michael J. Leggieri Jr., director of the Defense Department's Blast Injury Research Program Coordinating Office, told American Forces Press Service.

DOD has long recognized the risks of overpressure and shock waves associated with blasts on the human body, Leggieri said.

For the past 18 years the Army Medical Research and Material Command based here has conducted a robust research program focused on occupational exposures to blasts -- such as when an artillery crewman fires a howitzer.

As a result, the command helps the Army evaluate the blast impact of every weapons system before it's fielded.

But the current conflicts, and the frequency of percussive blasts and explosions, leave researchers questioning: What effect are they having on the brain, and how can we better protect service members against traumatic brain injuries?

The answer isn't as easy as it may appear, Leggieri explained. That's because, despite decades of study in the United States and around the world about brain injury, no one completely understands what happens to the human brain during a blast.

In fact, DoD has a lot of clinical data about the impact of blasts on the brain, but that's from animal studies, Leggieri said. Comparing animal data to humans, particularly when dealing with something as complex as the brain, raises as many questions as it answers, he said.

In terms of humans, DoD has just one confirmed clinical case of a deployed service member who suffered a brain injury in a blast without hitting his head, Leggieri said.

"We know a lot about what happens when you get hit in the head or hit your head against something and it causes a brain injury," Leggieri said. "That has been studied for decades, primarily by the automotive industry. Impact is something we know quite a bit about. But this whole question about blast is still a question."

And although the Army is at work on its second-generation helmet sensor with plans to field it soon to about 30,000 soldiers, there's still no clear indication of what those blast readings will mean in terms of the brain.

Theories abound in how blasts can cause brain injuries, Leggieri said. One prevalent theory advocates that the blast shock wave causes the skull to flex and as a result, damages the brain. Another theory actually has nothing to do with the head. It supports the idea that the blast pressure squeezes the thorax -- much the way fingers squeeze a tube of toothpaste. The result, theorists say, is a sudden vascular surge that goes up into the brain, causing an injury.

Getting to the bottom of what exactly happens is more than a scientific exercise, Leggieri said, it's critical to finding the best way to protect service members.

The first theory might support a new kind of combat helmet protection, or modification to the current helmet. The latter might call for modified body armor. But providing the wrong solution, no matter how well-intentioned, could actually backfire in adding more weight and less mobility to the warfighter.

"If you are restricting their ability to perform the mission, you are actually putting them at risk because now they can't do what they need to do to survive," Leggieri said. "So you have got to be very careful about what protection systems you put on a soldier. You have to make sure they are really effective at what they are supposed to be doing.

"My point is, if you don't

Continued on page 7

Stay TRICARE Eligible: Keep DEERS Up-to-Date

By Sharon Foster
TRICARE Management Activity

Beneficiaries who have recently experienced a life changing event, such as the birth or adoption of a child, recent divorce or marriage should immediately record these changes in the Defense Enrollment Eligibility Reporting System (DEERS). If they wait, their TRICARE benefit coverage could be affected.

"Life comes at you fast and beneficiaries should not wait to update DEERS when they experience any life event that changes their TRICARE status," said John Arendale, chief, Purchased Care Systems Integration Branch, TRICARE Management Activity. "What beneficiaries don't want to experience is a lapse in TRICARE coverage because their DEERS eligibility information is incorrect."

Incorrect information can potentially impact a beneficiary's ability to get a prescription filled, get a medical claim paid or make an appointment to see a doctor. Beneficiaries can easily avoid these types of problems by making sure their DEERS record is accurate."

DEERS is the worldwide, computerized database designed to maintain timely and accurate information on service members and dependents that are eligible for military benefits and entitlements, including TRICARE. It is also used to detect and prevent fraud and abuse. All sponsors are automatically registered in DEERS. The sponsor must register all eligible family members. Once the registration process is complete, the family members can update their personal information, such as addresses and phone numbers.

Events that change a beneficiary's TRICARE status include: relocation, retirement, change of address, change in marital status, birth, death, adoption or Medicare entitlement.

A beneficiary can register eligible new family members in DEERS at the nearest military personnel office or uniformed services identification (ID) card issuing office. To find an office near them, they can go to the Rapids Site Locator website, www.dmdc.osd.mil/rsl/owa/home. Beneficiaries can call to update contact information only at 1-800-538-9552.

Note: At the Marine Corps Air Ground Combat Center, the DEERS office is located in the Village Center, bldg. 1551.

To register a child in DEERS, bring the following forms:

* An original or certified-copy of the birth certificate or certificate of live birth (signed by the attending physician or other responsible person from a U.S. hospital or military treatment facility) or consular report of birth (FS-240) for children overseas;

* A record of adoption or a letter of placement of the child into the home by a recognized placement/adoption agency or the court before the final adoption; and

* A DD form 1172 signed by the sponsor and verifying official from a uniformed services ID card-issuing facility.

Get more information on DEERS eligibility at www.tricare.osd.mil/deers/default.cfm.

"Updating information in DEERS is the key to maintaining eligibility for TRICARE and other military benefits," Arendale said.

Note: At the Marine Corps Air Ground Combat Center, the DEERS office is located in the Village Center, bldg. 1551.

Blast Impact on Human Brain...

Continued from page 6

understand the mechanism, you can't possibly protect against it," he added. "You may end up doing something that has no effect whatsoever."

Leggieri assembled a forum of about 100 of the world's leading brain-injury researchers to determine, first, whether their work shows that blast-induced mild traumatic brain injuries actually exist, and, if so, what happens within the brain to cause them.

"With this expert panel, we are reaching out to this community of modelers, clinicians, and experimentalists who do animal research in blasts, and getting these communities to finally work together and to communicate with each other," he said. "We are going to have them help us pin down what we don't know and to get to a solution."

The meeting proved to be a huge success. Attendees "started to communicate, to share information, to come up with ideas about how we might approach this," Leggieri said.

What's needed, they agreed, is a validated mathematical model to show how a blast interacts with the human head, and how that might cause a brain injury. Current models -- and there are several -- are based on simulations that can't be scientifically validated, Leggieri said.

So Leggieri established a DoD Brain Injury Modeling Expert Panel, made up of 19 leading modelers from academia, industry and government. So far they have met four times, with their fifth and final session slated for this summer.

"Their work is going to help us develop a research roadmap that will take us from where we are today ... to a validated model of blast-induced brain injury that we can say with confidence is an accurate model of what happens to humans," Leggieri said.

That milestone, he said, will help the Defense Department better tailor protective systems for its service members.

"The goal and the focus are on how to prevent this," he said. "Let's understand it and find a way to prevent it. If we can make a difference just in these areas, I think would be a huge advancement."

TRICARE Prime Enrollment by Phone...

Continued from page 3

WEST (874-9378) after arriving at their new duty station to complete the transfer.

All beneficiaries (including active duty) can continue to use these options to transfer TRICARE Prime enrollment after a move:

* Online: Enrollees in the U.S. can log onto DoD's Beneficiary Web Enrollment site (www.tricare.mil/bwe) to update their enrollment.

* By Form: Complete and sign the TRICARE Prime Enrollment Application & PCM Change Form (DD Form 2876). Submit the form by mail or at a TRICARE Service Center.

Find enrollment forms, contact information and more at www.triwest.com/beneficiary and www.tricare.mil/enrollment.

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Naval Hospital Celebrates National Women's Health Month

A Women's Health Fair and Pap Smear Walk-in clinic will be held at the hospital May 11, and May 25, to celebrate Women's Health Month.

Also, women visiting the clinic during this time can pick up educational materials and ask questions from medical staff regarding women's health.

National Women's Health Week is a nationwide initiative that calls attention to the importance of women's health. The theme for National Women's Health Week is "It's Your Time."

During the week, families, health organizations, businesses, communities, the government and individuals come together to raise awareness of women's health issues and educate women about simple steps they can take for longer, healthier and happier lives. "By investing some time in women's health assessments, we ensure our patients and their families keep their focus on preventive health," said Jessica McLaren, breast care coordinator at the hospital.

"National Women's Health Week is important because it encourages women to take time for their health," says Commander Ramona Nixon, Director of Medical Services at the hospital. "Women are often the caregivers for their families and, as a result, forget to make their own health a priority. With National Women's Health Week, we remind women that they, too, need to visit the doctor, make sure their screenings are up-to-date and just take a minute to think about their health. By keeping women healthy, we keep our families healthy," Nixon added.

National Women's Health Week kicks off on Mother's Day, May 8, and will be celebrated until May 14. National Women's Checkup Day... a day on which women across the country are urged to visit their health care professional... will be held on May 9.

For more information about National Women's Health Week, please visit http://www.womenshealth.gov/whw

CPOs Celebrate Anniversary...

HMCS Rodney Ruth, Senior Enlisted Advisor at the Robert E. Bush Naval Hospital pins the Chief's Anchor on Captain Ann Bobeck, Commanding Officer, Naval Hospital Twentynine Palms after the Chiefs at the Marine Corps Air Ground Combat Center made her an honorary Chief Petty Officer as part the celebration of the Chief Petty Officer rank anniversary.

TriWest Offers New Service to Combat Anxiety

--Expanding Condition Management Programs to include Anxiety--

TriWest Healthcare Alliance has a new Disease Management program for clinically diagnosed anxiety, which now joins the array of wellness and disease management programs offered to eligible TRICARE beneficiaries.

Anxiety is a normal reaction to stress and, in general, can help one cope. But when anxiety becomes an excessive, irrational dread of everyday situations, it develops into a disabling disorder. Anxiety disorders last at least six months and can grow worse if not treated. Eligible beneficiaries suffering from this level of anxiety can receive extra help through TriWest Healthcare Alliance, which manages the TRICARE military healthcare entitlement on behalf of the Department of Defense (DoD) for 21 western states.

Significant anxiety disorders affect about 40 million U.S. adults 18 years and older in a given year, according to the National Institute of Mental Health. To compare, approximately 37 million people live in the state of California.

The Anxiety Disease Management program at TriWest has a number of services to help beneficiaries cope with their disorder, including a health coach who works with one's primary care manager to tailor an action plan. The health coach will then work with the beneficiary until the plan's goals are met. As needed, the beneficiary can also access smoking cessation, exercise, medication and nutrition help from his or her TriWest health coach.

TriWest's Disease Management department also offers support to beneficiaries with diabetes, asthma, lung diseases (COPD), heart failure and major depression. The anxiety program, launched by TriWest in March, is a no-cost entitlement for those who are eligible. Eligibility is determined by TRICARE and is based on claims history. Once a beneficiary is identified as eligible to participate in the program, the DoD refers the beneficiary to TriWest. A Disease Management health coach then contacts the beneficiary and invites him or her to participate in the program.

In addition to what it offers through its Disease Management programs, TriWest works alongside the Military Health System to offer behavioral health resources for those in need. One such resource is the TRICARE Assistance Program (TRIAP). With this program eligible beneficiaries, including services members and their families, can access private, confidential counseling sessions 24/7 with a licensed therapist via the Internet (Skype), chat or the phone. These sessions are non-clinical and intended for general life issues, such as stress management or relationship problems. For more information, visit www.triwest.com/onlinecare.

Important Date in History:

On May 2, 1945 a then 18-year-old Robert E. Bush rendered aid to a Marine Corps Officer thereby saving that Marine's life while successfully fighting off several charging Japanese Soldiers... all while being severely wounded himself. For this action on Okinawa that day, Bush was awarded the Medal of Honor. 55 years to the day later on May 2, 2000, this hospital was rededicated in this young Corpsman's name as the Robert E. Bush Naval Hospital. The Marine Corps Officer survived World War II and eventually became a Municipal Judge in Yolo County, Calif.

Happy Birthday Navy Nurse Corps!

Est. May 13, 1908